



06/04/03

1637\$

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application No.	10/014,743	
	Filing Date	October 29, 2001	
	First Named Inventor	Linda G. LEE	
	Examiner Name	J. Riley	
	Group Art Unit	1637	
Total Number of Pages in This Submission		Attorney Docket No.	A-72076-4/AMP

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	check
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ann M. Caviani Pease (42,067)
Signature	
Date	June 2, 2003



**AMENDMENT
FEE CALCULATION
2003**

Complete if Known	
Application No.	10/014,743
Filing Date	October 29, 2001
First Named Inventor	Linda G. LEE
Group Art Unit	1637
Examiner Name	J. Riley
Atty. Docket Number	A-72076-4/AMP

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Claims as Amended in Response to Office Action dated:

METHOD OF PAYMENT (Check One)		AMENDMENT FEE CALCULATION (Continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>50-2319</u> Deposit Account Name: <u>DORSEY & WHITNEY LLP</u> <input type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)		3. ADDITIONAL FEES	
2. <input checked="" type="checkbox"/> Check Enclosed		Large Entity Fee	Small Entity Fee
		Fee Description	Fee Paid
		110	55
		410	205
		930	465
		1,450	725
		1,970	985
		320	160
		320	160
		280	140
		110	55
		110	55
		1,300	650
		1,300	650
		130	130
		180	180
		750	375
		Other fee (specify):	
		Subtotal (2) 930.00	
		Total Amount of Payment: \$3070.00	

AMENDMENT FEE CALCULATION				
1. EXTRA* CLAIM FEES				
Claims Remaining after Amendment	Highest Number Previously Paid for	Present Extra	Fee from Below*	Additional Fee
Total 104	20	= 84	x 18	= \$1512.00
Indep. 5	3	= 2	x 84	= \$168.00
First Presentation of MultipleDependent Claim		x		= \$280.00
Subtotal (1)				\$1960.00
*Calculation of Extra Claim Fees				
Large Entity Fee	Small Entity Fee	Fee Description		
18	9	Claims in excess of 20		
84	42	Independent claims in excess of 3		
280	140	Multiple dependent Claim		
84	42	Reissue independent claims over original patent		
18	9	Reissue claims in excess of 20 and over original patent		

Submitted by:

Name: Ann M. Caviani Pease	Reg. No.: 42,067	Telephone: (650) 494-8700
DORSEY & WHITNEY LLP	Four Embarcadero Center, Suite 3400 San Francisco, California 94111-4187	CUSTOMER NUMBER 32940
Signature:	Date:	